



Professional Solutions INSURANCE COMPANY

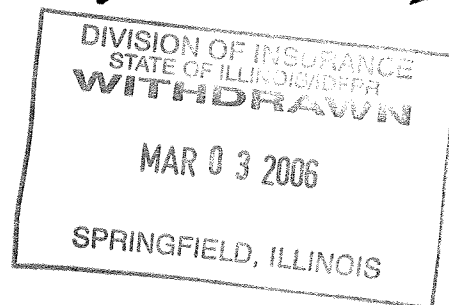
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A member of NCMIC Group, Inc.
NCMIC Insurance Company
NCMIC Finance Corporation
Professional Solutions Insurance Company
NCMIC Insurance Services

June 30, 2005

Illinois Insurance Division
Property / Casualty Division
VIA SERFF

RE: Professional Solutions Insurance Company
NAIC #: 11127
FEIN #: 42-1520773
Medical Professional Liability - Rate Filing
Filing #: PSIC-MD-2005 Rate
Effective Date: July 1, 2005



To Whom It May Concern:

Professional Solutions Insurance Company currently has on file with the Illinois Insurance Division a claims made professional liability rating manual for our Physicians and Surgeons Program. The Illinois Division of Insurance most recently approved this manual with an effective date of June 7, 2004 in SERFF Filing SERT-5ZLKAQ639. PSIC would like to submit for your review and approval an amended claims made professional liability rating manual to replace the manual currently on file for our Physicians and Surgeons Program. At this time we are submitting for your review and approval amendments to the claims made rating manual as follows:

1. 8.0% Base Rate Change:

Territory I Current Base Rate: \$ 16,976	Proposed Base Rate: \$ 18,334
Territory II Current Base Rate: \$ 12,567	Proposed Base Rate: \$ 13,572
Territory III Current Base Rate: \$ 11,089	Proposed Base Rate: \$ 11,976
Territory IV Current Base Rate: \$ 8,131	Proposed Base Rate: \$ 8,781

2. Addition of 50% reduced rate for a moonlighting resident.
3. Addition of Board Certification Credit.
4. Revision of the Experience Rating Claims Free Credit and Claims Debits Factors for and individual policy.
5. The Partnership, Corporation or Professional Association with Shared Limits of Liability Endorsement, form PSIC-CM-02, has been deleted and replaced by the Solo Practitioner Corporation with Shared Limits of Liability Endorsement, form PSIC-CM-18.
6. Addition of the Multiple Partnerships, Corporations or Professional Associations Endorsement, form PSIC-CM-19.
7. Addition of the Ancillary Medical Personnel Coverage Endorsement, form PSIC-CM-20.

If you have any questions or need any additional information regarding this filing, please feel free to contact me. I thank you in advance for your attention to this matter.

